STATEMENT OF ORGANIZATION			OFFICE USE ONLY	
Name and Address of Committee		2. Date of this Statement	PAC	
Metropolitan Hospital Council PAC Inc.		01/08/2016	5/0	
2450 Severn Avenue		Estimated Membership	1/29	
Metairie, LA 70001		0		
Check If:		4. Amended Statement?	# 196627	
New Committee	Monthly Filer	Yes <u>X</u> No	#196627 #0093	
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)				
a. <u>Name</u>	b. <u>Position</u>	c. Address		
Paul Salles	Chairperson	9521 Brookline Avenue, Baton I	Rouge, LA 70809	
Patricia Jeter	Treasurer	Treasurer 9521 Brookline Avenue, Baton Rouge, LA 70809		
Affiliated Organizations     (Any organization, other than a	political committee, which directly	or indirectly established, administers, or	financially supports this committee.)	
a. <u>Name</u> b. <u>Address</u> c. <u>Relationship to Committee</u>			c. Relationship to Committee	
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)				
a. <u>Name</u> b. <u>Address</u>				
Iberia Bank, 3700 Essen Lane, Baton Rouge, Louisiana 70809				
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee				
b. Name of Candidate			c. Office Sought by the Candidate	
			3	
9. a. Name of Person Preparing	Report			
b. Daytime Telephone		-55	20 196	
10. WE HEREBY CERTIFY that to and belief.	he information contained in this STA	TEMENT OF ORGANIZATION FORES	correct to the best of our knowledge, information	
Thisday of	Lit		<b>3</b>	
Signature of Comp	nittee Chairnerson		28-0026 time Telephone Number	
Signature of Committee Chairperson Daytime Telephone Number				
Jatrie	a D. Other	225_92	28-0026	
Signature of Committee Treasurer, if any			Daytime Telephone Number	